

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michael D. MACKLIN et al.

Title: MYCOBACTERIUM TUBERCULOSIS

IMMUNIZATION

Appl. No.: 09/501,328

Filing Date: 2/9/2000

Examiner: Rodney P. Swartz

Art Unit: 1645

AMENDMENT TRANSMITTAL

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	34	-	62	=	0	х	\$50.00	=	\$0.00
Independent Claims:	4	-	8	=	0	x	\$200.00	=	\$0.00
First p	resentation	of a	ny Multiple I	Depei	ndent Claims:	+	\$360.00	=	\$0.00
					CLAIMS	FEI	E TOTAL	=	\$0.00

[X] Applicants hereby petition for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[] Extension for response filed within the first month:	\$120.00	\$0.00
[X] Extension for response filed within the second month:	\$450.00	\$450.00
[] Extension for response filed within the third month:	\$1,020.00	\$0.00
EXTENSION F	EE TOTAL:	\$450.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER F	EE TOTAL:	\$450.00
[] Small Entity Fees Apply (subtract !	√2 of above):	\$0.00
T	OTAL FEE:	\$450.00

- [X] A check in the amount of \$450.00 to cover the two-month extension of time fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

 $\mathbf{B}\mathbf{y}$

Respectfully submitted,

Date

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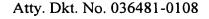
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Attorney for Applicant

Registration No. 35,792





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1645

AMENDMENT AND REPLY UNDER 37 CFR § 1.116

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This communication is responsive to the Final Office Action dated August 10, 2004, concerning the above-referenced patent application. The period for response has been extended up to January 10, 2005 by the two (2) month extension of time included in the attached Transmittal. Although applicants believe that the amount of the attached check is correct, the Commissioner is hereby authorized to credit any overpayment or to charge any deficiency to Deposit Account No. 19-0741.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 6 of this document.

Please amend the application as follows:

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